



IDAHO DEPARTMENT OF  
HEALTH & WELFARE

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June 5, 2010

Heather Davis  
Home Again ICF  
2311 Aruba Drive  
Nampa, ID 83686

FILE COPY

RE: Home Again ICF, Provider #13G078

Dear Ms. Davis:

On June 2, 2010, a follow-up visit of your facility, Home Again ICF, was conducted to verify corrections of deficiencies noted during the survey of April 23, 2010.

We were able to determine that the Condition of Participation on Client Behavior and Facility practices (42 CFR 483.450) is now met.

Your copy of a Post-Certification Revisit Report, Form CMS-2567B, listing deficiencies that have been corrected is enclosed, along with a full ICF/MR license. This license is effective June 2, 2010, through December 31, 2010.

Thank you for the courtesies extended to the surveyors during their visit. If we can be of any help to you, please call us at (208) 334-6626.

Sincerely,

NICOLE WISENOR  
Co-Supervisor  
Non-Long Term Care

NW/srp  
Enclosures